

12/11/01
1048 U.S. PTO

12-14-01

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Please type a plus sign (+) inside this box [+]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 80398.P465

(maximum 12 characters)

First Named Inventor Ming-Chang Liu

Title: SCENE CHANGE DETECTION

Express Mail Label No. EL867652663US

10/015040
12/11/01

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant Claims Small Entity Status. (37 CFR 1.27)
3. Specification (Total Pages 46)
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawings(s) (35 USC 113) (Total Sheets 28)
5. Oath or Declaration (Total Pages 5)
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
 - c. Unsigned.
6. Application Data Sheet. (37 CFR 1.76)
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. _____ **Assignment Papers (cover sheet & documents(s))**
10. _____ a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
_____ b. Power of Attorney
11. _____ English Translation Document (if applicable)
12. _____ a. Information Disclosure Statement (IDS)/PTO-1449
_____ b. Copies of IDS Citations
13. _____ **Preliminary Amendment**
14. **Return Receipt Postcard (MPEP 503) (Should be specifically itemized)**
15. _____ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. _____ **Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.**
17. _____ Other: _____

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation _____ Divisional _____ Continuation-in-part (CIP) _____
Of Prior Application No.: _____ Examiner _____ Group Art Unit _____
(which is a continuation/ divisional/ CIP of prior application no. _____,
which is a continuation/ divisional/ CIP of prior application no. _____) (List entire chain of priority)

Applicant(s): Also include a Preliminary Amendment to amend the specification to claim priority.

For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____ (or a copy of which is attached).

19. Correspondence Address

Customer Number or Bar Code Label _____
or _____ (Insert Customer No. or Attach Bar Code Label here)
 Correspondence Address Below

NAME _____

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard

Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Name (PRINT/TYPE): Sheryl Sue Holloway Registration No.: 37,850

Signature:  Date: DEC. 11, 2001

FEE TRANSMITTAL FOR FY 2002TOTAL AMOUNT OF PAYMENT (\$) \$ 902.00

Complete if Known:

Application No. ***
 Filing Date 12/11/01
 First Named Inventor Ming-Chang Liu
 Group Art Unit ***
 Examiner Name ***
 Attorney Docket No. 80398.P465

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
 Deposit Account Name _____

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed: Check
 Money Order
 Other

FEE CALCULATION**1. BASIC FILING FEE**Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Description
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Code	(\\$)	Code	(\\$)	Utility application filing fee	Fee Paid
101	740	201	370	Design application filing fee	<u>740.00</u>
106	330	206	165	Plant filing fee	_____
107	510	207	255	Reissue filing fee	_____
108	740	208	370	Provisional application filing fee	_____
114	160	214	80		

SUBTOTAL (1) \$ 740.00**2. EXTRA CLAIM FEES**Extra ClaimsFee from
belowFee Paid

Total Claims <u>29</u>	- 20** = <u>9</u>	X <u>18</u> = <u>162.00</u>
Independent Claims <u>3</u>	- 3** = <u>0</u>	X <u>84</u> = <u> </u>
Multiple Dependent		= <u> </u>

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Description
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Code	(\\$)	Code	(\\$)	Claims in excess of 20
103	18	203	9	Independent claims in excess of 3
102	84	202	42	Multiple dependent claim, if not paid
104	280	204	140	**Reissue independent claims over original patent
109	84	209	42	**Reissue claims in excess of 20 and over original patent
110	18	210	9	

SUBTOTAL (2) \$ 162.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	
Code	(\$)	Code	(\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
099	8,800	099	8,800
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
148	110	248	55
149	740	249	370
179	740	279	370
169	900	169	900
195	300	195	300
196	300	196	300
194	130	194	130
098	130	098	130
091	1,280	091	1,280
Acceptance of unintentionally delayed claim for priority			

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$_____

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Sheryl Sue Holloway

Signature: [Signature] Date: DEC. 11, 2001

Reg. Number: 37,850 Telephone Number: (408) 720-8300